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DATE: May 2, 2005

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FROM: Shahpar Shahpar

PHONE: 602-382-6306

MESSAGE:

Attached is the Notice of Appeal regarding Serial No. 09/872,499

ORIGINAL DOCUMENT: Will not be sent

NUMBER OF PAGES (Including Cover):

5

CONFIRMATION NO.:

CLIENT MATTER NO.: 29288.1000

PLEASE RETURN TO:

S.Bowman/16S02

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/872,499
	Filing Date	June 1, 2001
	First Named Inventor	Tadanori Izumi
	Art Unit	2161
	Examiner Name	Cam-Linh T. Nguyen
Total Number of Pages in This Submission	Attorney Docket Number	29288.1000

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Technology Center (TC)
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	Notice of Appeal
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Certified Copy of Priority Document(s)	Remarks	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Shahpar Shahpar, Reg. No. 45,875, SNELL & WILMER LLP One Arizona Center, 400 East Van Buren Phoenix, Arizona 85004-2202
Signature	
Date	May 2, 2005

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the			
Typed or printed name	Sheila Bowman		
Signature		Date	May 2, 2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Doc Code:

PTO/SB/17 (12-04v2)

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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

**FEE TRANSMITTAL
for FY 2005**☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT (\$)** **\$950.00****Complete if Known**

Application Number	09/872,499
Filing Date	June 1, 2001
First Named Inventor	Tadanori Izumi
Examiner Name	Cam-Linh T. Nguyen
Art Unit	2161
Attorney Docket No.	29288.1000

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Deposit Account Number: 19-2814 Deposit Account Name: Snell & Wilmer LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or any underpayment of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid(\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependant claims	360	180
Multiple Dependent Claims		
Fee (\$)	Fee Paid (\$)	

Total Claims - 20 or HP = x \$50.00 = \$0.00

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims - 3 or HP = x \$200.00 = \$0.00

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listing under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
<u> </u> - 100 = <u> </u> / 50 <u> </u> (round up to a whole) x <u>\$250.00</u> = <u>\$0.00</u>				

4. OTHER FEE(S)

Non-English specification, \$130 fee (no small entity discount)

Other (e.g. late filing surcharge): Notice of Appeal (\$500) and 2-month extension (\$450) **\$950.00**

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	45,875	Telephone	(602) 382-6306
Name (Print/Type)	Shahpar Shahpar			Date	May 2, 2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Date: May 2, 2005 By: [Signature]

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE
PATENT

Inventor(s):	Tadanori IZUMI	Docket No.:	29288.1000
Applicant:	NIHON INTERSYSTEMS CO., LTD.		
Serial No.:	09/872,499	Filing Date:	June 1, 2001
		Examiner:	Cam-Linh T. Nguyen
NEW TITLE:	AUTOMATIC AGGREGATION METHOD, AUTOMATIC AGGREGATION APPARATUS, AND RECORDING MEDIUM HAVING AUTOMATIC AGGREGATION PROGRAM	Art Unit:	2161

NOTICE OF APPEAL UNDER 37 C.F.R. § 1.191

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Honorable Commissioner:

Applicant hereby appeals to the Board of Patent Appeals and Interferences from the decision of the Primary Examiner dated December 2, 2004 twice rejecting claims 1-7. 37 C.F.R. § 1.191. This Notice of Appeal is being filed within 5 months of the mailing date of the Final Office Action, so that a 2 month extension fee applies. 37 C.F.R. § 1.136.

REMARKS

The fee for filing this Notice of Appeal is \$500, and a two month extension is hereby requested with an extension fee of \$450. **Accordingly, the Notice of Appeal fee of \$500 plus the extension fee of \$450 totaling \$950.00 should be charged to deposit account No. 19-2814.** Please charge any additional fees (including any fees under 37 C.F.R. §§ 1.134 and 1.136) regarding this Notice of Appeal, or credit any overpayment, to deposit account No. 19-2814.

Two duplicate copies of this Notice of Appeal are enclosed.

Date: 5-2-05

Respectfully submitted,



Shahpar Shahpar, Reg. No. 45,875

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